



05-18-05 HWT 1614
Docket No.: 62276(45579)
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Thomas Hogberg et al.

Application No.: 10/510,907

Filed: October 8, 2004

For: NOVEL METHOZYBENZAMIBE
COMPOUNDS FOR USE IN MCH
RECEPTOR RELATED DISORDERS

Confirmation No.: 7331

Art Unit: N/A

Examiner: Not Yet Assigned

RESPONSE TO NOTIFICATION OF MISSING REQUIREMENTS

MS Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notification of Missing Requirements mailed
March 16, 2005, Applicants respectfully submit a Declaration for Patent Application, a
Supplemental Application Data Sheet, and a copy of the Notification of Missing
Requirements.

Please charge our Deposit Account No. 04-1105 in the amount of \$130.00
covering the fee set forth in 37 CFR 1.16(f), \$950.00 for 19 total claims over 20, and
\$360.00 multiple dependant surcharge. The Director is hereby authorized to charge
any deficiency in the fees filed, asserted to be filed or which should have been filed
herewith (or with any paper hereafter filed in this application by this firm) to our

05/19/2005 EHAILE1 00000074 041105 10510907

01 FC:1202	950.00 DA
02 FC:1203	360.00 DA
03 FC:1051	130.00 DA

Deposit Account No. 04-1105, under Order No. 62276(45579). A duplicate copy of this paper is enclosed.

Dated: May 16, 2005

Respectfully submitted,

By 

Stephana E. Patton, Ph.D.

Registration No.: 50,373

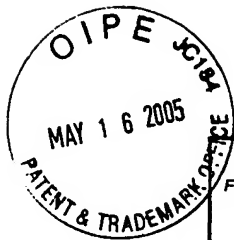
EDWARDS & ANGELL, LLP

P.O. Box 55874

Boston, Massachusetts 02205

(617) 439-4444

Attorney for Applicants



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/510,907-Conf. #7331
		Filing Date	October 8, 2004
		First Named Inventor	Thomas Hogberg
		Examiner Name	Not Yet Assigned
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	N/A
TOTAL AMOUNT OF PAYMENT		(\$)	\$1,440.00
		Attorney Docket No.	62276(45579)

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards & Angell, LLP</u>				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
_____	19	50
	x	=
		\$950.00
Indep. Claims	Extra Claims	Fee (\$)
_____	_____	_____
	x	=

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)
\$360.00	\$360.00

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____
- 100 =	_____	/50	(round up to a whole number) x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration	130.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	50,373
Name (Print/Type)	Stephana E. Patton, Ph.D.	Telephone	(617) 439-4444
		Date	May 16, 2005



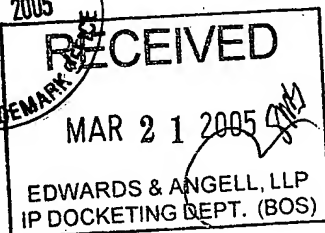
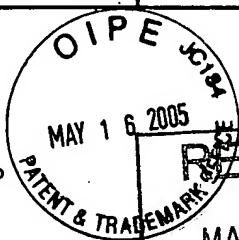
UNITED STATES PATENT AND TRADEMARK OFFICE



UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

U.S. APPLICATION NUMBER NO. 10/510,907	FIRST NAMED APPLICANT Thomas Hogberg	ATTY. DOCKET NO. 62276(45579)
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21874
EDWARDS & ANGELL, LLP
P.O. BOX 55874
BOSTON, MA 02205



INTERNATIONAL APPLICATION NO. PCT/DK03/00231	
LA. FILING DATE 04/08/2003	PRIORITY DATE 04/09/2002

CONFIRMATION NO. 7331
371 FORMALITIES LETTER



OC00000015433564

Date Mailed: 03/16/2005

NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)

The following items have been submitted by the applicant or the IB. to the United States Patent and Trademark Office as a Designated / Elected Office (37 CFR 1.495).

NOTED ON SYSTEM

- Copy of the International Application filed on 10/08/2004
- Copy of the International Search Report filed on 10/08/2004
- Copy of IPE Report filed on 10/08/2004
- Copy of Annexes to the IPER filed on 10/08/2004
- English Translation of Annexes to the IPE filed on 10/08/2004
- Preliminary Amendments filed on 10/08/2004
- Request for Immediate Examination filed on 10/08/2004
- U.S. Basic National Fees filed on 10/08/2004
- Priority Documents filed on 10/08/2004

Missing Parts
Edwards & Angell LLP
101 Federal St. Boston, MA 02110
Docketed For 5/16/05 - 9/16/05
By SPB/ST
Approved _____

The applicant needs to satisfy supplemental fees problems indicated below.

The following items **MUST** be furnished within the period set forth below in order to complete the requirements for acceptance under 35 U.S.C. 371:

- Additional claim fees of **\$1310** as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.
- Oath or declaration of the inventors, in compliance with 37 CFR 1.497(a) and (b), identifying the application by the International application number and international filing date.

SUMMARY OF FEES DUE:

Total additional fees required for this application is **\$1310** for a Large Entity:

Additionally the following defects have been observed:

- Annexes have not been entered because they are not a page for page substitution.
- Total additional claim fee(s) for this application is \$ 1310
 - \$950 for 19 total claims over 20.
 - \$360 for multiple dependent claim surcharge.

ALL OF THE ITEMS SET FORTH ABOVE MUST BE SUBMITTED WITHIN TWO (2) MONTHS FROM THE DATE OF THIS NOTICE OR BY 32 MONTHS FROM THE PRIORITY DATE FOR THE APPLICATION, WHICHEVER IS LATER. FAILURE TO PROPERLY RESPOND WILL RESULT IN ABANDONMENT.

The time period set above may be extended by filing a petition and fee for extension of time under the provisions of 37 CFR 1.136(a).

Applicant is reminded that any communications to the United States Patent and Trademark Office must be mailed to the address given in the heading and include the U.S. application no. shown above (37 CFR 1.5)

*A copy of this notice **MUST** be returned with the response.*

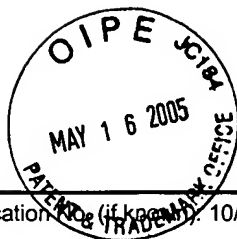
TAMALA D HOLLAND

Telephone: (703) 308-9140 EXT 209

PART 1 - ATTORNEY/APPLICANT COPY

U.S. APPLICATION NUMBER NO.	INTERNATIONAL APPLICATION NO.	ATTY. DOCKET NO.
10/510,907	PCT/DK03/00231	62276(45579)

FORM PCT/DO/EO/905 (371 Formalities Notice)



Application No. (if known): 10/510,907

Attorney Docket No.: 62276(45579)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV493499009US in an envelope addressed to:

MS Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on May 16, 2005
Date

Signature

Karen Brown

Typed or printed name of person signing Certificate

@@@

Registration Number, if applicable

(617) 439-4444

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)
Supplemental Application Data Sheet (5 pages)
Declaration for Patent Application (5 pages)
Copy of Notification of Missing Requirements (2 pages)
Response to Notification of Missing Requirements (2 pages, in duplicate)
Return receipt postcard
Charge \$130.00 to deposit account 04-1105